**APPLICATION DATA SHEET** 

## **Application Information**

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	METHOD AND APPARATUS FOR THE APPLICATION OF POWDER MATERIAL TO SUBSTRATES
Attorney Docket Number::	1000035-000072
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	12
Small Entity?::	No

Latin Name:: Variety Denomination Name:: Petition Included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers:: Secrecy Order in Parent Appl.?:: No **Applicant Information** Applicant Authority Type:: Inventor Primary Citizenship Country:: **United Kingdom** Status:: **Full Capacity** Given Name:: Simon Middle Name:: Family Name:: TULLETT Name Suffix:: City of Residence:: Gamlingay State or Province of Residence:: Sandy Country of Residence:: United Kingdom Street of Mailing Address:: Offa Cottage, 2 Chapel Field City of Mailing Address:: Gamlingay State or Province of Mailing Sandy Address:: Country of Mailing Address:: **United Kingdom** 

**SG19 3QP** 

06/30/06

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Postal or Zip Code of Mailing

Inventor
United Kingdom
Full Capacity
Adrian
JARVIS
St Neots
Cambs
United Kingdom
3 Milton Avenue Eaton Ford
St Neots
Cambs
United Kingdom
PE19 7LH
Inventor
United Kingdom
Full Capacity
David
BILLINGTON

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Name Suffix:: City of Residence:: Wellingborough State or Province of Residence:: Northamptonshire Country of Residence:: United Kingdom Street of Mailing Address:: 19 Moreton Avenue City of Mailing Address:: Wellingborough State or Province of Mailing Northamptonshire Address:: Country of Mailing Address:: United Kingdom Postal or Zip Code of Mailing NN8 2JE Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: United Kingdom Status:: Full Capacity Given Name:: Russell Middle Name:: Family Name:: **KING** Name Suffix:: City of Residence:: Irthlingborough State or Province of Residence:: **Northants United Kingdom** Country of Residence:: 138 Finedon Road Street of Mailing Address::

City of Mailing Address::

Address::

State or Province of Mailing

Page # 4 06/30/06

Irthilingborough

**Northants** 

Country of Mailing Address:: United Kingdom Postal or Zip Code of Mailing NN9 5UB Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: **United Kingdom** Status:: **Full Capacity** Given Name:: David Middle Name:: **GLEDHILL** Family Name:: Name Suffix:: City of Residence:: Dry Drayton State or Province of Residence:: Cambs Country of Residence:: **United Kingdom** Street of Mailing Address:: 16 Scotland Farm Cottages City of Mailing Address:: **Dry Drayton** State or Province of Mailing Cambs Address:: Country of Mailing Address:: United Kingdom Postal or Zip Code of Mailing **CB3 8BN** Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: **United Kingdom** Status:: Full Capacity Given Name:: Paul

Middle Name::

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Family Name:: WILLSHER Name Suffix:: City of Residence:: Royston State or Province of Residence:: Herts Country of Residence:: **United Kingdom** Street of Mailing Address:: 27 Layston Park City of Mailing Address:: Royston State or Province of Mailing Herts Address:: Country of Mailing Address:: **United Kingdom** Postal or Zip Code of Mailing SG8 9DS Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: United Kingdom Status:: **Full Capacity** Given Name:: Michael Middle Name:: John Family Name:: **HOLROYD** Name Suffix:: City of Residence:: **Great Shelford** State or Province of Residence:: Cambridge Country of Residence:: **United Kingdom** 

Street of Mailing Address::

City of Mailing Address::

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11 Headley Cardens

**Great Shelford** 

State or Province of Mailing

Address::

Cambridge

CB2 5JZ

Country of Mailing Address::

**United Kingdom** 

Postal or Zip Code of Mailing

Address::

**Correspondence Information** 

Correspondence Customer Number:: 21839

Phone Number::

(703) 836-6620

Fax Number:

(703) 836-2021

Representative Information

Representative Customer Number:: 21839

**Domestic Priority Information** 

Application::

**Continuity Type::** 

Parent Application::

Parent Filing

Date::

This Application

National Stage of

PCT/GB2004/005458

12/30/04

**Foreign Priority Information** 

Country::

**Application Number::** 

Filing Date::

**Priority** 

Claimed::

**Great Britain** 

0330171.0

12/30/03

Yes

**Assignee Information** 

Assignee Name::

PHOQUS PHARMACEUTICALS LIMITED

Street of Mailing Address::

10 Kings Hill Avenue, Kings Hill

City of Mailing Address::

West Malling

State or Province of Mailing

Kent

Address::

Country of Mailing Address::

**United Kingdom** 

Page #7 06/30/06 Postal or Zip Code of Mailing ME19 4PQ Address::

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